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(Department of Health)

RECONSTRUCTION AND IMPROVEMENT  
OF  
COUNTY HOMES

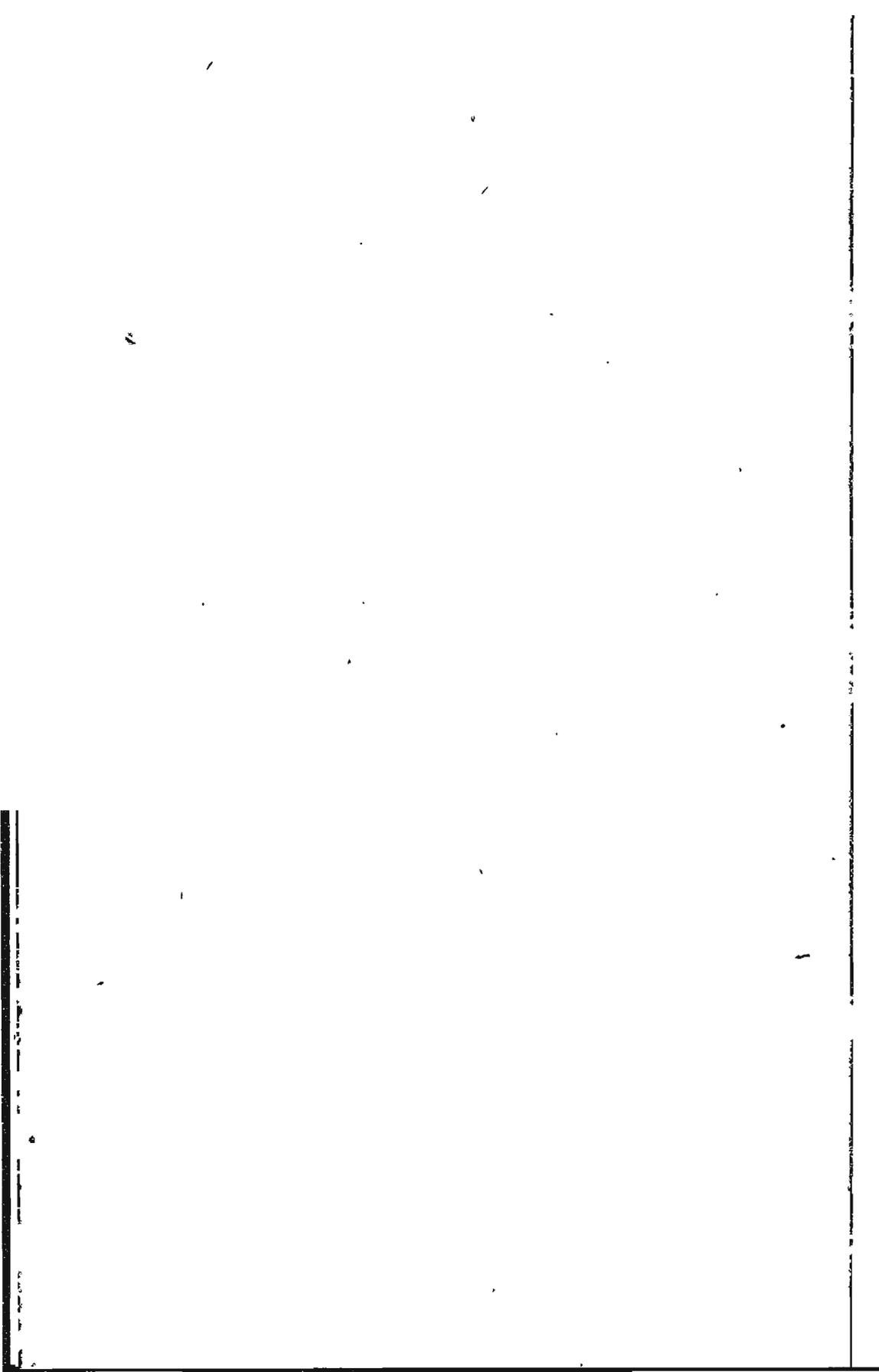


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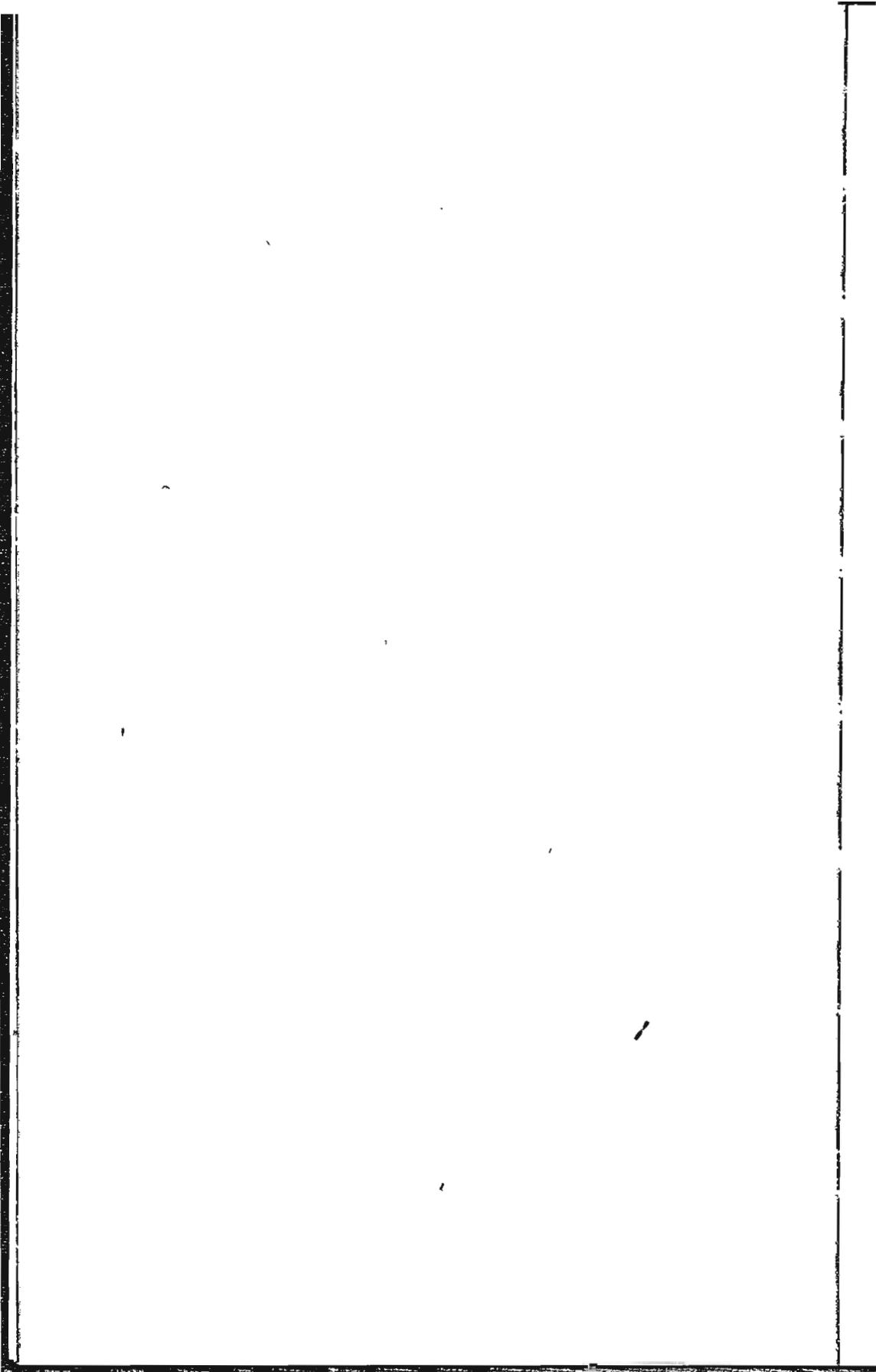
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# WHITE PAPER

ON

## The Reconstruction and Improvement of County Homes.

### I. HISTORICAL.

County Homes are a product of the reorganisation of the Poor Relief system which took place in the early twenties of the century. The multiplicity of Unions, which from 1838 to 1920 formed the local basis of Poor Relief, was abolished except in Dublin City and County. The County replaced the Union as the unit of administration. The Workhouses in each county were either closed or converted to hospitals. In practically every county, however, a workhouse was selected for the reception of those inmates in the other workhouses who did not require hospital or other special treatment. The workhouse so chosen was designated the "County Home", and these homes thus became repositories for all types and conditions of poor persons the majority of whom were aged and infirm, but who also included considerable numbers of mental defectives, unmarried mothers, children (legitimate and illegitimate), persons suffering from various long-term illnesses and some able-bodied destitute.

The workhouse was the central feature and instrument of the Poor Law policy which was introduced in Great Britain in 1834 and applied to Ireland in 1838. For a number of years it was in Ireland the sole means of relief. Its avowed purpose was to discourage applications for relief so thoroughly that the administrators of the Poor Law could be certain that any applications received were prompted by genuine destitution. Conditions in the workhouses were designed to be such that only dire necessity could drive a poor person to seek admission for himself or his family.

The original workhouse buildings were in every case provided by the central authority at that time, the English Poor Law Commissioners. At page 27 of the Fifth Annual Report of the Commissioners it is stated that:—

"The style of building is intended to be of the cheapest description, compatible with durability; and effect is aimed at by harmony of proportion and simplicity of arrangement, all mere decoration being studiously excluded."

The following description of a typical workhouse is taken from the Report of the Poor Relief Commission of 1927 (paragraph 34):—

“The majority of the buildings were commenced in the years 1839-1840, and finished within three or four years. They were built much on the same plan. The walls were unplastered and the rooms unceiled. In their construction and fitting up a rigid economy was observed. One side of the house was allotted to males and the other to females. The classification on each side was roughly as follows:—

- (1) The Admission Ward, which in later years became the casuals' or night lodgers' ward,
- (2) The Able-bodied,
- (3) The Infirm,
- (4) The School and Children Ward,
- (5) The Infirmary,
- (6) The Lunatic Ward.

In addition, there was on the female side a nursery and maternity ward. In some of the larger workhouses there were wards known as the male and female separation wards. The standard of comfort in the body of the house was, in many instances, very poor, and the closet and bathing accommodation bad.”

It is of interest to note that in his history of the Irish Poor Law, Sir George Nicholls states that:—

“The Guardians, very generally, wished that the finishing and fitting should be more costly and complete than was the case in the English houses; and, if the prevalent desire on this point had been complied with, the workhouses in Ireland would have been finished and fitted up after the model and with all the appliances of a hospital or infirmary.”

The transformation of workhouses into County Homes can be described only briefly here. Towards the end of the 19th century the decrease in the population of Ireland and the march of public opinion created a demand for a modification of the existing system of Poor Relief. The Vice-Regal Commission on Poor Law Reform, which reported in 1906, found 159 workhouses still in use out of the original 163. They recommended, not the wholesale amalgamation of Unions and closing of workhouses, but a re-distribution of patients so as to secure the largest possible measure of specialisation. The proper treatment of certain classes, the acutely sick for example, made it inevitable that some workhouses would have to be altogether eliminated. The following quotation summarises the attitude of the Commission:—

“Our proposals are to close the 159 Workhouses as such, but not to reduce on the whole the number of local hospitals. It is, however, obvious that it would be cheerless and dismal

in most instances to arrange that the acute sick should be placed or left in a few wards of an otherwise deserted large block of Workhouse buildings. Where the Workhouse would not in any re-arrangement be required for some useful purpose, we suggest that the Workhouse and site should become the property of the Government, and be at their disposal for sale or otherwise, as might be thought fit, the Government to erect out of the general taxation of the United Kingdom, hospitals suitable for the requirements of each district. . . . The Wards and arrangements existing in most Workhouses in Ireland are quite unfit for the treatment of surgical or even medical cases according to any modern standards; and . . . this defect must be attributed to action taken contrary to the advice of Irish Boards of Guardians."

The Commission also recommended that the infirm or aged in the various Workhouses should be removed to a County Institution to be known as the County Alms House. These Alms Houses were to be Workhouses suitably situated and adapted for the purpose.

The Royal Commission on the Poor Laws, which reported in 1909, were in general agreement with the findings and recommendations of the Vice-Regal Commission. They shared the opinion expressed in 1906 that the general mixed workhouse was unsuited for conditions in Ireland and was foreign to the sentiment of the country; that lack of classification of the inmates of the workhouse was one of the gravest defects of the existing system of administration, and that effective classification could not be attained as long as all classes of inmates were housed within the walls of a single institution. They affirmed that it was a cardinal principle of all proposals that there should be classification *by* institutions and not merely *in* institutions.

No effective steps were taken to implement these recommendations.

When the old Poor Relief System was being remodelled in 1921 and when reorganisation on a county basis was superseding the former network of Unions, the opportunity seemed to have arisen for a thorough rationalisation of the workhouse system and the substitution of specialised hospitals and homes for the former general mixed workhouses. The County Schemes formulated by County Councils in 1921 and legalised by the Local Government (Temporary Provisions) Act, 1923, seem to have been derived from this idea. Unfortunately there appeared to be no clear realisation of the function of a County Home. There was a general impression, or implied intention that County Homes should be reserved for the aged and infirm poor and chronic invalids. In fact, the schemes made insufficient provision for classes such as unmarried mothers, children and mental defectives which were then accommodated in workhouses, and made it inevitable that the new Home in each county, reserved in theory for the aged and infirm and chronic invalids and intended to be adapted suitably to that purpose, was

in fact filled with a miscellaneous population for which no special provision had been made and never lost its character of general mixed workhouse.

## II. COMMISSION ON POOR RELIEF, 1927.

The Commission on Poor Relief which reported in 1927 found that (paragraphs 75 and 76):—

“ In all the County Schemes except that of Louth it is provided that the aged and infirm and chronic invalids are to be provided with institutional treatment in the County Homes. In Louth, where no County Home is set up under the schemes, the aged and infirm are provided with institutional relief in the District Hospitals. We know from inspection as well as from the returns of inmates submitted to us by the Local Government Department that in nearly all the County Homes are to be found lunatics, idiots, imbeciles and, except in those counties where other special provision is made for them, expectant and unmarried mothers, and children are also to be found in all the County Homes. It could not be otherwise, and, although under the schemes they do not appear to be everywhere eligible for admission, morally it would be a grievous wrong to refuse them admission.”

In paragraph 96 the Commission stated :—

“ We desire to state emphatically that in our opinion the County Homes are not fit and proper places for the reception of the various classes which we have found in them, and, therefore, in so far as the schemes, either through omission to make provision for or through actual commission in bringing together these classes, have conduced to that state of affairs they must, on that ground, if on no other, be deemed inadequate and unsatisfactory.”

The Commission stressed that it was originally intended that County Homes should be reserved only for the reception of the aged and infirm poor and chronic invalids, and that separate provision should be made for the other classes. This had not been done. They added (paragraphs 96 and 97):—

“ Reserved even for the classes for whom they were intended, they require, with one or two exceptions, much structural alteration before they can be considered as coming up to the standard of comfort required.

• The essentials for a County Home are a good water supply and sanitary and bathing accommodation, well ventilated wards, good beds, sufficient dormitory accommodation, good kitchen and laundry arrangements and possibly, above all, a sympathetic and maternal administration.

The sanitary and bathing accommodation and the kitchen and laundry accommodation and the day-room accommodation in some of the Homes are extraordinarily bad, whilst the beds and bedding and the ventilation of the wards in some need improvement. The blame for this condition of affairs does not attach wholly to those charged in recent years with the duty of attending to the necessities of the poor, but a continuance of the present conditions would be a serious blot on schemes adopted for the purpose of improving and humanising the administration of public assistance."

The Commission recommended that the original intention to reserve the County Homes for the aged and infirm poor and chronic invalids should be revived and the Homes brought up to a satisfactory standard, separate specialised accommodation to be provided for unmarried and married mothers, children and mental defectives. In general these recommendations have not been carried out. Individual Homes have been improved but the underlying defects persist. The Homes are residual institutions and all types of cases, for which nothing better in the way of institutional treatment can be found, drift there and remain there.

### III. INTER-DEPARTMENTAL COMMITTEE, 1949.

In February, 1949, the Government decided that an Inter-Departmental Committee consisting of representatives of the Departments of Health, Finance, Social Welfare and Local Government should be set up to examine the question of the Reconstruction and Replacement of the County Homes and to submit a report to the Minister for Health. The Committee concluded their work and submitted its report to the Minister on the 25th January last.

#### (a) *Report on Present Position.*

The number of inmates in County Homes on the 31st March, 1950, was 8,585, classified as follows:—

Chronic sick	....	....	....	....	3,210
Aged (over 65) other than chronic sick	....	....	....	....	1,998
Other adults (under 65 and excluding mothers and casuals)	....	....	....	....	1,136
Mental defectives	....	....	....	....	595
Blind	....	....	....	....	187
Deaf Mutes	....	....	....	....	41
Casuals	....	....	....	....	139
Unmarried mothers	....	....	....	....	450
Children	....	....	....	....	829

The report of the Committee indicates that, while the buildings are sound and spacious, they are lacking in comfort and amenities.

In general, the day rooms and dining-rooms are cheerless and badly furnished. They are frequently unceiled and have unplastered walls. These factors combined with unsatisfactory lighting and rough bare floors render the atmosphere depressing.

There is considerable variation in the standard of the kitchens and cooking facilities. In some Homes the standard is very good, in others it is so low that the food, while originally of good quality, is unappetising when served.

The wards are large and commonly have unplastered walls, no ceilings, rough floors, poor beds and bedding, very few chairs or lockers and no dressing tables or mirrors. A number of the wards still have the original central valley or depression which served as a gangway when the inmates slept on straw spread on the raised portion of the floor at either side.

The narrow, steep stone stairways, which elderly and ailing people find difficulty in using, still survive in many Homes. In a number of Homes, however, efforts have been made to improve the staircases by covering them with wood. No County Home has a lift. Windows are generally too small and often have the original workhouse diamond panes and in general they are ineffective either for the provision of ventilation or light.

Sanitary and bathing facilities are insufficient and are generally rather crude. Baths are the ordinary deep reclining type into and out of which helpless patients must be lifted, often with great difficulty. Supplies of running water, especially running hot water, are frequently insufficient. Sluice rooms are few. Central heating is a rarity and the standard of heating resulting from the single open fire in a large ward or room is usually quite inadequate. Quite often, too, the fires smoke, thus adding to the prevailing gloom. There are no single rooms or cubicles for special cases requiring them on medical grounds, and small wards are rare.

The accommodation provided for unmarried mothers and children is, in general, equally unsatisfactory and in particular the committee reported that the environment of a County Home is most unsuitable for children. The nurseries are rough, poorly furnished and lacking in elementary playing facilities. In some County Homes, proper segregation of children and adults is not possible.

The foregoing paragraphs, the Committee pointed out, do less than justice to some County Homes where an energetic staff and sympathetic Public Assistance Authority have contrived to overcome the disabilities inherent in the buildings. In fact, the condition of some Homes reflects credit on the responsible Public Assistance Authority.

(b) *Recommendations.*

A fundamental requirement already mentioned is that County Homes should cease to be institutions housing a variety of persons for whom specialised accommodation is obviously more desirable. The Committee recommended that only two classes should remain in the County Homes, viz., the Aged and the Chronic Sick.

The trend of development in other countries is towards the provision of accommodation for old people in homes entirely distinct from hospitals. The intention is that the old people's Homes should approximate as nearly as possible to a normal home such as the residents might have had in their former household, and that any residents who should require medical or nursing care should be removed to a hospital. In some of these countries, a limit of thirty residents to each Home for old people is being adopted as a matter of policy. The purpose of the limitation is to produce an intimate atmosphere and to render the Home unlike an institution.

The Committee considered very carefully this trend towards separate accommodation for the two classes mentioned, but felt that as a matter of practical policy the housing of the two classes in a single institution had much to recommend it. Many persons who are aged but not sick require fairly frequent medical and nursing attention and the Committee felt that such attention would most readily be provided if both classes were housed in the same institution. The lay-out of the County Home buildings lends itself to the segregation which is commonly agreed to be desirable. In regard to the possible argument that the Home (as distinct from the hospital) portion would be so big that all the services available to patients would become impersonal, the Committee point out that voluntary institutions in this country for the care of the aged, many of which house more than a hundred persons, have achieved excellent results in the matter of comfort and happiness of the residents and that the busy atmosphere of a fairly large Home appeared to have the very desirable effect of preserving their mental and physical alertness, an effect often missing in the smaller and quieter Homes. Further, the border-line between "aged" and "chronic sick" is sometimes narrow and there is less upset to a patient in transfer from one portion of an institution to another than in transfer from one institution to another. The Committee, in these circumstances, felt that they would not be justified at this stage in recommending separate institutions for the two classes while a reasonable solution at cheaper cost could be achieved.

With a few exceptions, provision has not yet been made for specialised hospital treatment of old people; they have not, in fact, been recognised generally as a separate medical class with the result that they have invaded and occupy all sorts of institutions not primarily intended for them or suited to their needs. They are found in large numbers in County Homes, to an extent which has gone a long way to alter the nature and purpose of these institutions; they may also be found in various District and in some County Hospitals. On the one hand, they occupy hospital accommodation and unnecessarily monopolise equipment specifically provided at high cost for acute cases; on the other, they are relegated to Homes intended mainly for non-medical cases where they cannot be properly looked after, or could not if the Homes retained their nominal status. The Committee recommended that this unsatisfactory position should be terminated as soon as possible and that

the hospital sections of the County Homes should be suitably developed to provide the simple facilities needed for the specialised medical and nursing care and for the general comfort and happiness of this class. By so doing, a better service would be achieved at a lower cost than under the present haphazard system.

The Committee also recommended that there should be a closer liaison between the County Home and the County Hospital, especially where they are both situated in the same town. The services of the specialists and such specialist facilities as X-ray, Pathology, Physiotherapy, etc., provided in the County Hospitals should be made freely available to the patients and the Medical Officer of the County Home. The main aim should be to ensure that a patient will not be regarded as incurable until every effort has been made to cure him. Failing cure, the next aim should be to prevent further deterioration and to keep him active as long as possible.

Occupational and diversional therapy has not been developed in County Homes and any programme for improvement should include remedies for this situation, both in relation to old people and chronic sick. The aim should be to keep old people active and interested in their surroundings, and, as most Homes are provided with ample grounds and gardens, it should be possible to find suitable outdoor recreational occupations for most of the able-bodied. For others, suitable light work or pastimes could be provided indoors. It is now generally recognised that the rapid physical deterioration which has been a feature of so many of the old people admitted to the County Homes has been due to the sudden transition from a life of comparative activity to a seemingly purposeless existence.

It is not desirable that old people should be admitted to an institution if suitable accommodation can be found for them elsewhere and it is recommended that local authorities should explore the possibility of securing alternative homes for old people with families in the district in which they live by supplementing whatever payment the old people may be able to make out of their pensions. Co-operation between local authorities and voluntary organisations whose members visit the aged in their own homes should be fostered and local authorities should be encouraged to assist voluntary effort.

Should it be necessary for local authorities to provide new or additional institutional accommodation, the Committee recommended that the first endeavour should be to stimulate the provision of old people's homes by voluntary bodies and to this end they should be empowered to make capital grants (to which the State would contribute) to such bodies for the purpose. If local authorities must themselves provide extra accommodation, the acquisition and conversion of large houses should be considered. The factors which militate against the conversion or adaptation of existing structures for hospital or sanatorium purposes are not present to the same extent where homes for old people are concerned.

*Children.*

As already mentioned, the Committee considered that a first essential was the removal of all children from County Homes. Boarding-out in suitable foster homes has up to the present proved to be a reasonably satisfactory method of dealing with this problem, to the extent to which it has been dealt with, and the Committee recommended that the system, with certain improvements, be continued and extended. They pointed out, however, that it will be necessary to provide institutional accommodation for children under the normal boarding-out age (2 years), additional to the industrial schools which cater for children above that age, for whom foster homes are not available. For the accommodation of children awaiting boarding-out or placing in industrial schools, the Committee recommended the establishment of special homes which would, in addition, accommodate unmarried mothers for such time as it was found necessary for them to remain with their children and be maintained by the local authority, such special homes to be provided by groups of counties and placed under the control of appropriate organisations specialising in the care of unmarried mothers and their children. There are at present five special homes for the accommodation of unmarried mothers and their children.

*Unmarried Mothers.*

The Committee recommended that unmarried mothers, as such, should be removed from the County Homes to special homes as mentioned earlier. They suggested, however, that local authorities should consider the employment of such persons in the institutions under their charge, including the County Homes, as domestics after discharge from the special homes, so as to aid in their rehabilitation.

*Mental Defectives.*

They recommended that every effort should be made to remove from County Homes patients suffering from mental disorders who would benefit from treatment available elsewhere or who, owing to their condition, are a source of trouble and discomfort to other patients in the Homes. They pointed out, however, that there are numbers of persons in County Homes who are suffering from a mild type of mental disorder frequently associated with senility, and no fundamental objection is seen to the retention of such people in the Homes.

*Epileptics, Blind, Deaf Mutes.*

They recommended that these classes should no longer be accommodated in County Homes but should, when it becomes possible, be sent to institutions where they can receive treatment appropriate to their ailments.

*Casuals.*

According to information available, casual inmates of County Homes do not constitute a problem outside the cities and large towns. Nevertheless, there must always be a place available for people seeking a night's lodging and unable to obtain it out of their own resources. If County Homes are to be improved and their general status raised, the presence of vagrants in them will become more and more incongruous. Accommodation for casuals should, as far as possible, be provided in a section of the Home removed from the main buildings. In this field of activity, the Committee suggested that collaboration between local authorities and voluntary organisations would be particularly effective in the cities and large towns and that the appropriate local authorities in Dublin, Cork and Galway should approach voluntary bodies interested in the provision of accommodation for casually destitute persons in order to explore the possibility of having the work of looking after such people undertaken by voluntary workers. Should such an arrangement be possible, liability for the provision of any necessary buildings and for the payment of maintenance costs might be undertaken by the local authority.

## IV. GOVERNMENT'S DECISION.

(1) *General.*

The Government has accepted the recommendations of the Committee. To give effect to that decision, the Minister for Health proposes to invite each appropriate local authority to submit detailed proposals in regard to its functional area, such proposals, in addition to indicating the manner in which it is intended to deal with the classes no longer to be provided for in the County Home, to include a scheme for the reconstruction and improvement of the County Home buildings and surroundings providing for—

- (a) the demolition of unnecessary walls and derelict buildings, the laying out and planting of grounds with due regard to the special needs of the residents and general improvement in the appearance of the institutions;
- (b) the break-up of large wards, either into smaller wards or by the use of appropriate glazed screens;
- (c) adequate lavatories, bathrooms, sluice rooms, etc.;
- (d) plastering of walls, provision of proper ceilings, painting and distempering in light colours;
- (e) improved artificial and natural lighting;
- (f) improved heating arrangements;
- (g) ample hot and cold water supply;
- (h) improved kitchen accommodation and equipment;

- (i) suitable laundry facilities;
- (j) suitable furniture and equipment;
- (k) paving of yards, paths, etc.

While in general it is not intended that there should be a multiplicity of homes and hospitals for the accommodation of the aged and chronic sick in any area, sympathetic consideration will be given to proposals for a limited number of subsidiary institutions, provided by adaptation of existing local authority buildings or country houses, in a few of the very large counties where hardship would result from removing old people to too great a distance from their friends.

While, from the point of view of providing most economically for large numbers of able-bodied aged, the adaptation as proposed of the present County Home premises appeared to the Government to be the solution most likely to produce rapid results, it is felt that, in addition to the grant of assistance to voluntary agencies to establish homes and the "boarding-out" procedure advocated by the Committee, local authorities and voluntary agencies might make a small but useful contribution to the problem by providing, in suitable circumstances, accommodation by way of colonies of small dwellings, or flats in adapted country houses, with, in either case, a communal kitchen and dining-room where a limited number of aged, healthy persons would look after their own needs, relieved, however, of the necessity of cooking their main meals. This system is in operation to a limited extent in other countries, but in view of its experimental nature here, any such schemes should be planned on a flexible basis and no fixed or rigid plan should be insisted upon at this stage.

## (2) *Finance.*

While the cost of providing accommodation for the aged has up to the present been a charge on the finances of local authorities, the Government has decided, in order to encourage local authorities to make a rapid improvement in standards, to make State grants available to those authorities by way of contribution to loan charges on moneys borrowed for the purpose of carrying out the works now recommended. The grant will be at the rate of 50 per cent. of the loan charges, subject to the provision that the maximum capital outlay per bed in each institution on which such contribution will be paid will be £500. State aid on these lines will be available for expenditure on the following:—

- (a) reconstruction and improvement of existing buildings used for the accommodation of the classes at present provided for in County Homes;
- (b) provision of new homes for unmarried mothers and children;

- (c) contributions to voluntary agencies willing to provide portion of the cost of new homes for unmarried mothers and children and aged;
- (d) contributions to voluntary agencies which undertake to provide for casuals; and
- (e) the development of colonies of aged persons on the lines indicated in the preceding paragraph.

It is extremely difficult to estimate the cost of the programme outlined, but it is calculated that the maximum total outlay will be in the region of £5,000,000. The total loan charges on such a debt for a period of 40 years are calculated at £256,000 a year, and the annual amount payable by the State and by the local authorities would, therefore, be ultimately about £128,000 each which, in the case of local authorities, means on average the produce of a rate of about 2½d. in the £ on Poor Law valuations, which is a small price to pay for such a necessary reform.